## 10030490420

FEC FORM 1

## RECEIVED

## 2010 NOV -8 AM 9: 06 FEC MAIL CENTER

## STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1.	NAME OF COMMITTEE (in fu	ii)	(Check if name is changed)	Example: If typying, to over the lines	ype 12FE4M5	
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	is changed)	Ded	ham	<del></del>	L LMA L	
	•			CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)						
	(Check if address	dayi	d@chickmontan	agroup.com	<u> </u>	<u>. , , , , ,</u> , , , , 1
	is changed)	1.3			(. j . j . j	
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COMMITTEE'S WEB PAGE ADDRESS (URL)						
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2. DATE M M M O D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
3. FEC IDENTIFICATION NUMBER						
4.	IS THIS STATEME	NT X NE	W (N) OR	AMENDED	(A)	
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete						
Type or Print Name of Treasurer David_N. Martin						
Type of the traine of the sales						
Signature of Treasurer Date Date						
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.						
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS						
	Office Use Only			For further infor Federal Election Toll Free 800-424 Local 202-694-11	Commission 1-9530	FEC FORM 1 (Revised 02/2009)